CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MR\$/MR) FIRST OSCAC NICKNAME LAST LEESER	MI 	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of address 5 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE#; CITY; 1017 QUINTA ANTIGUE EL PASO, TEXAS 10 AREA CODE PHONE NUMBER (STATE; ZIP CODE 1A 1912 EXTENSION	Date Hand-delivered or Postmarkada O M M Receipt # Amount O M
OFFICEHOLDER PHONE 6 CAMPAIGN TREASURER NAME	(915) 373-1234 MS/MRS/MR CHRIST/WA NICKNAME LAST	M1 	Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE#;	CITY, STATE,	ZIPCODE EXAS 79907
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (915) 433-1647	EXTENSION	
9 REPORT TYPE	January 15 30th day before election Bth day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH	Month Day	Year / 2013
11 ELECTION	Month Cay Year ELECTION TYPE Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) MAYOR	
	GO TO PAG	6E 2	

CANDIDATE / OFFICEHOLDER REPORTERK DEPT. FORM C/OH 2013 MAY -2 PM 5: 5 COVER SHEET PG 2 **SUPPORT & TOTALS**

P.O. Box 12070

14 C/OH NAME SCAR	LEES	SER 15 AC	COUNT # (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	CANDIDATE / OFFICE	CE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POUNT OF THE CANDIDATE'S MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RE	OR OFFICEHOLDER'S KNOWLEDGE OR		
	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
additional pages			,		
·	,	COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ Ø		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$93,664.85		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$				
	4. TOTAL	POLITICAL EXPENDITURES	\$83,896.70		
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY DRTING PERIOD	\$ 6,969.30		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE MY OF THE REPORTING PERIOD	\$ 5,120.80		
NO In and My	/IA MERCADO DTARY PUBLIC I for the State of Texas commission expires 98-01-2016	I swear, or affirm, under penalty of perjuis true and correct and includes all informme under Title 15, Election Code. Signature of Candidate	nation required to be reported by		
AFFIX NOTARY STAN		me, by the said <u>OSCQV LeeSer</u>	, this the		
sworn to and sub	m	me, by the said $\frac{99247}{22227}$, to certify which, witness my harmonic	,		
Deluis	Pricad	1) Sylvia Mercado	Secretary		
Signature of officer adm	inistering oath	Printed name of officer administering oath	itle of officer administering oath		

(512) 463-5800

Texas Ethics Commission

POLITICAL CONTRIBUTIONS CITY CLERK DEPSCHEDULE A OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5: 51 The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) 2 FILER NAME OSCAR LEESER 7 Amount of 8 In-kind contribution THOMAS P. YEGGE 6 Contributor address; City; State; Zip Code 11112 TERRELL AVE. EL PASO, TX 79936 description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions 10 Employer (See Instructions) Full name of contributor In-kind contribution Amount of W. BARTON BOLING-Contributor address; City; State; Zip Code 6154 LOS FELINOS CIR. description (if applicable) contribution (\$) \$1,00C (If travel outside of Texas, complete Schedule T Employer (See Instructions) Full name of contributor out-of-state PAC (ID#_ RUSSELL F. ROBIN SON Contributor address; City; State; Zip Code 42 E. Lo 9 th ST. Amount of In-kind contribution description (if applicable) contribution (\$) NEW YORK, NY 10021 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) In-kind contribution Full name of contributor ___ out-of-state PAC (ID#:_ Amount of CARLOS A. SAMANIEGO Contributor address; City; State; Zip Code 329 BELVIDERE description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions Employer (See Instructions) In-kind contribution Amount of description (if applicable) contribution (\$) JOHN F. Mcalmon contributor address; City; State; Zip Code 2209 FOREST BEND (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

P.O. Box 12070 (512) 463-5800

OTHER THAN PLEDGES OR LOANS CITY CLERK DEPT. SCHEDULE A 2013 MAY -2 PM 5:51					
The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A:	
2 FILER NAME	LAR LEESER		3 ACCOUNT# (E	thics Commission Filers)	
4 Date	5 Full name of contributor □ out-of-state PAC (ID#:_		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
3/30/2013	BILL LESLIE 6 Contributor address; City; State; Zip Code 201 NORTHWIND DR. EL PASO, TX 79912		\$ 250 (If travel outside	 - of Texas, complete Schedule T)	
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See I	nstructions)		
Date "	Full name of contributor out-of-state PAC (ID#_ CHARLES P. CAVARETTA		Amount of contribution (\$)	In-kind contribution description (if applicable)	
3/28/2013	CHARLES P. CAVARETTA Contributor address; City; State; Zip Code 729 TWIN HILLS DR.		#300	 	
Principal occup	EL PASO, TX 79912 pation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)	
Date	Full name of contributor out-of-state PAC(ID#_ SHARON A. ROBINET		Amount of contribution (\$)	In-kind contribution description (if applicable)	
3 30 2013	SHARON A. ROBINET Contributor address; City; State; Zip Code 1075 ESPLANDA CIR. EL PASO, TX 79932		\$100.00		
Principal occup	pation / Job title (See Instructions)	Employer (See I	`	of Texas, complete Schedule T)	
Date	Full name of contributor out-of-state PAC(ID#_SAMUEL C, STREEP		Amount of contribution (\$)	In-kind contribution description (if applicable)	
3/30/2013	Contributor address; City; State; Zip Code 1624 DEDE		\$100	 	
Principal occup	EL PASO, TX 79902 pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)	
Date 4 2 2013	Full name of contributor out-of-state PAC (ID#_ JAMES E. ROGERS J Contributor address; City; State; Zip Code 5035 MEADOWLARK	R	Amount of contribution (\$)	In-kind contribution description (if applicable)	
1/0/0010	EL PASO, TX 79922		· · · · · · · · · · · · · · · · · · ·	of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See	instructions)	· .	
If c	ATTACH ADDITIONAL COPIES Contributor is out-of-state PAC, please see instr			requirements.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

CITY CLERK DEPT.

SCHEDULE **A**

OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5:51					
The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A:	
2 FILER NAME OSCF	IR LEESER		3 ACCOUNT # (E	thics Commission Filers)	
4 Date	5 Full name of contributor □ out-of-state PAC (ID#:_ GARY W. SOTIR		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
4/2/2013	GARY W. SOTIR 6 Contributor address; City; State; Zip Code 1532 VIA APPIA ST. EL PASO, TX 79912		#.1,000	 	
	•	10 Employer (See	<u> </u>	of Texas, complete Schedule T)	
a Principal occup	pation / Job title (See Instructions)	10 Employer (See	maductions)	±	
Date	Full name of contributor □ out-of-state PAC (ID#_ JAMIE HARRIS		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/3/2013	Contributor address; City; State; Zip Code 6104 PINEHURST DR. EL PASO, TX 79912		\$1,000	 	
	EL PASO, TX 79912		(If travel outside	 of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See	Employer (See Instructions)		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/8/2013	Contributor address; City; State; Zip Code P. O. BOX 13611		\$5,000		
	EL PASO, TX 79913		(If travel outside	of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)		
Date	Full name of contributor out-of-state PAC (ID#_SHERMAN H, BARNETT		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/8/2013	Contributor address; City; State; Zip Code 8913 DIRK COURT		\$5,000	1	
	EL PASO, TX 79925			of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)		
Date	Full name of contributor 🗆 out-of-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/8/2013	Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	\$5,000	 	
	EL PASO, TX 79922		(If travel outside	of Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See		·	

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POLITICAL CONTRIBUTIONS CITY CLERK DEPT. SCHEDULE A OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5: 51					
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:	
2 FILER NAME	AR LEESER		3 ACCOUNT # (E	thics Commission Filers)	
4 Date	5 Full name of contributorout-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
4/11/2013	6 Contributor address; City; State; Zip Code 5772 DIAMOND POINT EL PASO, TX 79912	CIR.	#3,500 (If travel outside o	of Texas, complete Schedule T)	
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See I	Instructions)		
Date	Full name of contributor out-of-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4/11/2013	Contributor address; City; State; Zip Code 1300 MURCHISON DR. SEL PASO, TX 79902	STE 100	^{\$} 250		
Principal occup	pation / Job title (See Instructions)	Employer (See I	·	of Texas, complete Schedule T)	
Date	Full name of contributor ut-of-state PAC (ID#:_		Amount of	In-kind contribution	
4/13/2013	SANDY HUGHES contributor address; City; State; Zip Code 4785 TURTLE DOVE EL PASO, TX 79922		contribution (\$)	description (if applicable) of Texas, complete Schedule T)	
Principal occur	pation / Job title (See Instructions)	Employer (See	Instructions)		
Pate 4/15/2013	Full name of contributor out-of-state PAC (ID#_RICARDO B, MED/NA contributor address; City; State; Zip Code 299 VAQUERO LN. EL PASO. TX 79902		Amount of contribution (\$)	In-kind contribution description (if applicable)	
Principal occup	pation / Job title (See Instructions)	Employer (See	·	of Texas, complete Schedule T)	
Date 4/15/20/3	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)	
110100	Contributor address; City; State; Zip Code P.D. BOX 12307 EL PASO, TX 79913		(If travel outside	of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
lf c	ATTACH ADDITIONAL COPIES Contributor is out-of-state PAC, please see inst			requirements.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

CITY CLERK DEPT. SCHEDULE A

(512) 463-5800

2013 MAY -2 PM 5: 51				
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A:			
2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)			
4 Date 5 Full name of contributorout-of-state PAC (ID#:	7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)			
JIM & NITA PHILLIPS 6 Contributor address; City: State; Zip Code 900 THUNDER BIRD DR.	\$1,000			
EL PASO, TX 79912	(If travel outside of Texas, complete Schedule T)			
9 Principal occupation / Job title (See Instructions) 10 Employe	er (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
HI5 2013 R. A. SMITH Contributor address; City; State; Zip Code P. D. BOX 370 167	\$1,000			
EL PASO, TEXAS 79937	(If travel outside of Texas, complete Schedule T)			
	er (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
WM J. MOUNCE Contributor address; City; State; Zip Code 600 SUNLAND PARK DR. STE 6	-300 # 2,500			
EL PASO, TX 79912	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Employe	er (See Instructions)			
Date Full name of contributor □ out-of-state PAC(ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
4/16/2013 Contributor address; City; State; Zip Code 515 S. KANSAS ST.	#2,500			
EL PASO, TX 79901	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Employe	er (See Instructions)			
Date Full name of contributor out-of-state PAC(ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
4/16/2013 Contributor address; City; State; Zip Code 1204 CALLE DEL SUR	\$100			
EL PASO, TX 79912	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Employe	er (See Instructions)			

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

CITY CLERK DEPT.

SCHEDULE A

	2013 MAY -2 PM 5: 51					
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:		
2 FILER NAME OSCI	AR LEESER		3 ACCOUNT # (Et	hics Commission Filers)		
4 Date	5 Full name of contributor □ out-of-state PAC (ID#:_ WADE Y, DAW		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
4/16/2013	WADE Y. DAW 6 Contributor address; City; State; Zip Code 4755 PINE CREEK LN.		\$50.00			
	EL PASO, TX 79922		(If travel outside o	of Texas, complete Schedule T)		
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	Instructions)			
Date	Full name of contributor ut-of-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)		
4/16/2013	Contributor address; City; State; Zip Code 5800 MONTANA AVE.		\$5,000			
	EL PASO, TX 79925			of Texas, complete Schedule T)		
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
4/16/2013		,	\$ 50.00			
	EL PASO, TX 79922		(lf-travel_outside o	I of Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)			
Date	Full name of contributor 🔲 out-of-state PAC (ID#:_		Amount of contribution (\$)	In-kind contribution description (if applicable)		
4/16/2013	MARY Y. DAW Contributor address; City; State; Zip Code 4734 DESERT CANYON	DR.	\$500,00	 		
	EL PASO, TX 79912		(If travel outside of	of Texas, complete Schedule T)		
Principal occup	oation / Job title (See Instructions)	Employer (See	Instructions)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
4/17/2013	DEHN E. SNITH Contributor address; City; State; Zip Code 5900 QUINTA REAL CT		\$1,000			
	EL PASO, TX 79912		(If travel outside	 of Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)			
		····				

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

(512) 463-5800

	, 2012 13A1 2 111 3: 31		
The Instruction Guide explains how to complete this	form. 1 Total pages Schedule A:	1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission	Filers)	
4 Date 5 Full name of contributor □ out-of-state PAC(ID#_ BARBARA BERLINER)		ontribution (if applicable)	
BARBARA BERLINER 6 Contributor address; City; State; Zip Code 213 NORTHWIND DR	\$200.°°		
EL PASO, TX 79912	(If travel outside of Texas, complete	Schedule T)	
9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)		
Date Full name of contributor □ out-of-state PAC(ID#_		ontribution (if applicable)	
THOMAS ALOST Contributor address; City; State; Zip Code 1000 QUINTA ANTI GUA L	N. \$500		
EL PASO, TX 79912	(If travel outside of Texas, complete	Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		
Date Full name of contributor □ out-of-state PAC (ID#_		ontribution (if applicable)	
4/17/2013 4/17/2	\$ 500		
EL PASO, TX 799 27	(If travel outside of Texas, complete	e Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		
Date Full name of contributor out-of-state PAC (ID#_ SANDY A, MESSER		ontribution (if applicable)	
SANDY A. MESSER Contributor address; City: State; Zip Code U504 EAGLE RIDGE EL PASO, TX 79912	\$500		
	(If travel outside of Texas, complete	e Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		
Date Full name of contributor out-of-state PAC (ID#:_		ontribution (if applicable)	
4/17/2013 Contributor address; City; State; Zip Code 1701 TOMMY AARON DR	\$1,000		
EL PASO, TX 79434	(If travel outside of Texas, complet	e Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)		

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CITY CLERK DEPT. **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5:51

P.O. Box 12070

SCHEDULE A

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A:			
2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)			
4 Date 5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$) description (if applicable)			
H 17 2013 6 Contributor address; City; State; Zip Code 5901 POMONA CT.	\$ 500			
EL PASO, 1X 79912	(If travel outside of Texas, complete Schedule T)			
9 Principal occupation / Job title (See Instructions) 10 Employer ((See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
4/17/2013 Contributor address; City; State; Zip Code 905 VIA PENASCO LN.	\$500			
EL PASO, TX 79912	(if travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Employer ((See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:) Amount of In-kind contribution contribution (\$) description (if applicable)			
FRANK FEUILLE contributor address; City; State; Zip Code 857 RIVER OAKS DR.	\$250			
EL PASO, TX 79912	(If travel outside of Texas, complete Schedule T)			
	(See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
HIT 2013 MARIA/SERGIO ALVAREZ Contributor address; City; State; Zip Code 1004 QUINTA ANTIGUA LN 51 PACO TY TO OLD	\$250			
EL PASO, TX 79912	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
4 17 2013 Contributor address; City; State; Zip Code 211 S. KANSAS ST.	\$250			
EL PASO, TX 79901	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Employer ((See Instructions)			

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Texas Ethics Commission

POLITICAL CONTRIBUTIONS CITY CLERK DEPTSCHEDULE A OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PH 5:5 The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) FILER NAME 8 In-kind contribution 7 Amount of GREG DIDONNA 6 Contributor address; City; State; Zip Code 5908 VIA NORTE LN contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#: In-kind contribution Amount of LUIS H. URREA II contributor address; City; State; Zip Code 5009 VISTA DEL MONTE ST. description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution LINDA K. BURNS contributor address; City; State; Zip Code 3029 STONE EDGE RD. contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) In-kind contribution Amount of DALTON L. CALDWELL JR Contributor address; City; State; Zip Code 1201 CERRITO PERDIDO LW description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Amount of contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

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(TDD 1-800-735-2989)

(512) 463-5800 P.O. Box 12070 POLITICAL CONTRIBUTIONS CITY CLERK DEPT. SCHEDULE A OTHER THAN PLEDGES OR LOANS 12013 MAY -2 PM 5:51 The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) 2 FILER NAME 4 Date In-kind contribution 7 Amount of description (if applicable) contribution (\$) JOSEPH OSTROWIDZKI 6 Contributor address; City; State; Zip Code 5925 OJO DE AGUA DR. (if travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution HERBERT H. ORTEGA Contributor address; City; State; Zip Code contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution Date MONICA C. VARGAS Contributor address; City; State; Zip Code HO17 FLAM/NGO DR. description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Full name of contributor ut-of-state PAC (ID#: Amount of HECTOR M. MALDONADO Contributor address; City; State; Zip Code 3260 N. MESA ST. description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) In-kind contribution Full name of contributor Amount of description (if applicable) contribution (\$) City; State; Zip Code Contributor address; (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Texas Ethics Commission	P.O. Box 12070	Austin, Texas	78711-2070	(512) 463-5800	(TDD 1-800-735-2989)
POLITICAL C OTHER THAN			3 .	LERK DEPT. -2 PM 5:51	SCHEDULE A
The Instruction	Guide explains how to	complete this f		1 Total pages Sched	fule A:
2 FILER NAME OSCAR	LEESER			3 ACCOUNT # (Eth	ics Commission Filers)
1		rt-of-state PAC (ID#:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4 17 2013 6 Contrib 2311	Utor address; City; Si	tate; Zip Code		\$250.00	
9 Principal occupation / Job	PASO, TX title (See Instructions)		10 Employer (See	•	Texas, complete Schedule T)
III JAC	OB S, HEYD	ut-of-state PAC (ID#:)EMANN		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/17/2013 Contrib 1300 F1	utor address; City; s OMURCHISO PASO, TX 7	tate;	E ,310	\$150.00	
Principal occupation / Job		170 00	Employer (See I	······································	Texas, complete Schedule T)
	T, ASS I utor address; city; s N, KANSAS	tate; Zip Code		Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job	,,	<u>79902</u>	Employer (See	· · · · · · · · · · · · · · · · · · ·	Texas, complete Schedule T)
		ut-of-state PAC (ID#: SFIELD		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/17/2013 869	OON E, MANS utor address; City; S FOREST WIL	tate; Zip Code	·	\$360.00	
Principal occupation / Job	title (See Instructions)	4722	Employer (See		Texas, complete Schedule T)
TAIN	AF LOWEN	ut-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/17/2013 6178	utor address; City; S B LOS ROBL PASO TV	ES DR.	79912	#100.00	
Principal occupation / Job	title (See Instructions)		Employer (See		f Texas, complete Schedule T)
	·				
	47740114001710		TUIC COUEDI II E	ACNEEDED	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. SCHEDULE A

		1 - 2 111 3: 3)	
The Instruction Guide explains how to complete this	s form.	1 Total pages Sche	1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (E	thics Commission Filers)	
4 Date 5 Full name of contributor out-of-state PAC(ID#:_ ANDRES ENRIQUEZ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
4/17/2013 6 Contributor address; City; State; Zip Code 553 CANVON SPRINGS	; >	\$100.00	 -	
EL PASO, TX 79912	,	(If travel outside o	I of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)	10 Employer (See I	<u> </u>		
Date Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
MARINO H. RIOS Contributor address; City; State; Zip Code 1714 N. MESA ST.	200	\$100.00	 	
EL PASO, TEXAS '19"	902	(If travel outside o	of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See I			
Date Full name of contributor out-of-state PAC (ID#_		Amount of	In-kind contribution description (if applicable)	
I I WALTER L. TIPPIN		contribution (\$)	description (ii applicable)	
417 2013 Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	HAFAOO		
3021 TRAWOOD		#250.°°]	
EL PASO, TX 79936		(If travel outside	of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See	· · · · · · · · · · · · · · · · · · ·	o. rozao, comprete contendie 1)	
Date Full name of contributor □ out-of-state PAC(ID#_ ROBERT A. SKIPWORTH		Amount of contribution (\$)	In-kind contribution description (if applicable)	
HI7 2013 KOBERT A. SKIPWORTH Contributor address; City; State; Zip Code		d 0000]	
310 N. MESA STE, 600		* dW;	1	
EL PASO, TX 79901		(If travel outside	of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See			
Date Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)	
ILITIONS L. SPIER			1	
Contributor address; City; State; Zip Code	•	#2000	1 1	
1 1 1 1 1 KIM KD:		J. J. J.	.i 	
IEL PASO, TX 19902			of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)	Employer (See	Instructions)		
	<u> </u>			

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POLITICAL CONTRIBUTIONS

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CITY CLERK DEPT.

SCHEDULE A

2013 MAY -2 PM 5:51					
The Instruction Guide explains how to	o complete this form.	1 Total pages Scho	edule A:		
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (E	thics Commission Filers)		
JORGE E, PEI G Contributor address; City; S 7950 SAN PA		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
1 = = 17190 / 17	79915		of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)	10 Employer (Se	ee Instructions)			
Date Full name of contributor CLEMENT MAR	out-of-state PAC (ID#:	_) Amount of contribution (\$)	In-kind contribution description (if applicable)		
824 DULCINEA	- ^ ^	\$ 500.00	 		
EL PASO, IX	79922		l of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)	Employer (So	ee Instructions)			
II MEVER MARCUS	out-of-state PAC (ID#:	Amount of contribution (\$)	In-kind contribution description (if applicable)		
H 18 2013 Contributor address; City; S 6500 MONTANA EL PASO, TX 7	AVE.	\$500.			
Principal occupation / Job title (See Instructions)		ee Instructions)	of Texas, complete Schedule T)		
			1		
II EPMPOA PAC	out-of-state PAC (ID#:	_) Amount of contribution (\$)	In-kind contribution description (if applicable)		
4/10/2017 747 E, SAN ANT	State; Zip Code ON 10, STE , 103	\$5,000	 		
EL PASO, TX	7990		of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)	Employer (S	ee Instructions)			
1 1 PAULETTE WIN	JGO	Amount of contribution (\$)	In-kind contribution description (if applicable)		
H 18 2013 Contributor address; City; S 10 21 LOS JA E1 PASO TY	RDINES CIR.	#1,000	 		
Principal occupation / Job title (See Instructions)	Fmployer (S	(If travel outside	of Texas, complete Schedule T)		
	Employer (o	oo maraaaana,			

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(TDD 1-800-735-2989) P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 CITY CLERK DEPT. POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS
2013 MAY -2 PM 5:51 SCHEDULE A Total pages Schedule A: The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) 2 FILER NAME Amount of In-kind contribution EPS OA PAC 6 Contributor address; City; State; Zip Code 747 E, SAN ANTONIO NO, 103 contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) ut-of-state PAC (ID#: Full name of contributor In-kind contribution Amount of SANTIAGO IBARRECHE

Contributor address; City; State; Zip Code

654 AGUA CALIENTE DR description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of In-kind contribution MICHELE BRADEN

Contributor address; City; State; Zip Code

6 200 PINEHURST DR description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) In-kind contribution Amount of description (if applicable) SANDY HUGHES

Contributor address; City; State; Zip Code contribution (\$) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Full name of contributor out-of-state PAC(ID#_ RVING J. BROWN

Contributor address; City; State; Zip Code

200 BARTLETT DR. In-kind contribution Amount of Date description (if applicable) contribution (\$)

Principal occupation / Job title (See Instructions)

(If travel outside of Texas, complete Schedule T) Employer (See Instructions)

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CITY CLERK DECHEDULE A POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5:51 The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) FILER NAME SCAR LEESER 7 Amount of In-kind contribution contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) out-of-state PAC (ID#: In-kind contribution Amount of description (if applicable) contribution (\$) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# In-kind contribution contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) Employer (See Instructions) In-kind contribution out-of-state PAC (ID#: Amount of Date description (if applicable) contribution (\$) City; State; Zip Code Contributor address; (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 (TDD 1-800-735-2989) POLITICAL CONTRIBUTIONS CITY CLERK DEPT. SCHEDULE A OTHER THAN PLEDGES OR LOANS 2013 MAY -2 Total pages Schedule A: The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) FILER NAME In-kind contribution 7 Amount of ELISEO H. BAEZA Contributor address; City; State; Zip Code 11672 ANDRIENNE contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#: In-kind contribution Amount of description (if applicable) contribution (\$) Contributor address; City; State; Zip Code (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description (if applicable) (if travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions In-kind contribution Amount of Date description (if applicable) contribution (\$) City; State; Zip Code (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Amount of description (if applicable) contribution (\$) ANDAL S, OLEARY Contributor address; City; State; Zip Code 1910 GATEWAY EAST STE 102 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

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CITY CLERK DEPT. **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5: 51

P.O. Box 12070

SCHEDULE A

The Instruction Guide explains how to complete this	form. 1 Total pages Schedule A:
2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5 Full name of contributor □ out-of-state PAC (ID#:	7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)
H 25 2013 6 Contributor address; City; State; Zip Code 3329 TIERRA ALMA	\$500.0
1 EL PASO. TX 79938	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Date Full name of contributor ☐ out-of-state PAC (ID#:_	Amount of In-kind contribution
GONZALO A. DIAZ	contribution (\$) description (if applicable)
425/2013 LOTLE QUINTA AN TIGUA	#2,500
'	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)
STEPHEN L. YEGGE Contributor address; City; State; Zip Code 4/25/2013 6357 CASPER RIDGE	
MAYDUS 6357 CASPER RIDGE	
Principal occupation / Job title (See Instructions)	(If travel outside of Texas, complete Schedule T)
Trincipal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor out-of-state PAC(ID#:	
DAVID D.KHKAN	
H25 2013 DAVID B., KARAM Contributor address; City; State; Zip Code 4025 ROADSIDE CT.	#250°1
1 1 7000 KOHUSIUE CI.	
EL PASO, 1X 1/9922	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor out-of-state PAC(D#:	Amount of In-kind contribution contribution (\$) description (if applicable)
LURETIA BLANKENSH	†/
H26/2013 9398 VISCOUNT BUD. S	STE 4A \$250.0
1 1 EL PASO, TX 79925	(if travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A:
2 FILER NAME	AR LEESER		3 ACCOUNT # (E	thics Commission Filers)
4 Date 4/20/2013	5 Full name of contributor □ out-of-state PAC(ID#:_ TUAN C, DURON 6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
9 Principal occup	3516 OF 10 PALMER EL PASO, TX 7993	8 Employer (See I	(If travel outside	of Texas, complete Schedule T)
	and, , coo side (coo mena-ne,	io minpioyer (ore	,	
Date	Full name of contributor out-of-state PAC(ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/27/2013	Contributor address; City; State; Zip Code 4785 TURTLE DOVE FL PASO TX 79922		\$300.00	f Taxas, complete Schedule T
Principal occup	eation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
		. , , ,		
Date	Full name of contributor out-of-state PAC (ID#_ STIART ROBERTS		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/27/2013	Contributor address; City; State; Zip Code 5 Lolo 9 COSTA BLANCA FLOACO TO TOO 3 0		#200.00)
	LL PASO, IX 1970 A		·	of Texas, complete Schedule T)
Principal occup	ation / Job title (See/instructions)	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#_ TEAN R, JOSEPH VANDER	RP001	Amount of contribution (\$)	In-kind contribution description (if applicable)
4/27/2013	Contributor address; City; State; Zip Code 425 MAJESTIC MOU EL PASO, TX 79912	NTAIN DR.	\$200.00	
				of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See I	nstructions)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4/27/2013	contributor address; City; State; Zip Code 205 COUNTRY CLUB R F1 PASO. TX 7993	2D.	#250.°°	
Principal occup	ation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

SCHEDULE A

OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5:51				
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A:			
2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)			
4 Date 5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)			
H27213 6 Contributor address; City; State; Zip Code 7465 PLAZA TAURINA EL PASO: TX 79912	(If travel outside of Texas, complete Schedule T)			
9 Principal occupation / Job title (See Instructions) 10 Employer	(See Instructions)			
Date Full name of contributor Out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
3/18/2013 9300 VIS COUNT #171	\$5,00			
Principal occupation / Job title (See Instructions) Employer	(If travel outside of Texas, complete Schedule T) (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$) In-kind contribution description (if applicable)			
3/28/20/31/1120 HLTO KEY AVE	\$100.00			
EL PASO, TX 79912 Principal occupation / Job title (See Instructions) Employer	(If travel outside of Texas, complete Schedule T) (See Instructions)			
Employer	(See Hallucions)			
Date Full name of contributor out-of-state PAC(ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
3/29/2013 Contributor address; City; State; Zip Code 6006 BALCONES # 9	\$1,000			
EL PASO, TX 79912	(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Employer	(See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:	Amount of In-kind contribution contribution (\$) description (if applicable)			
3 30/2013 JUNH I HAN HARRIS CONTRIBUTOR ADDRESS; City; State; Zip Code 2412 ROYAL BIRKDALE DR. PLAND, TX 75015	\$50.00			
1 11100/ 1 10000	(If travel outside of Texas, complete Schedule T) (See Instructions)			
: ins.pa. seedpation / see the (see instructions)				

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Texas Ethics Commissi	on P.O. Box 12070	Austin, Texas, 78	8711-2070	(512) 463-5800	(TDD 1-800-735-2989)
POLITICAL CONTRIBUTIONS CITY CLERK DEPT. SCHEDULE A OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5:51					
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	·	· · · · · · · · · · · · · · · · · · ·		6 10001NF # 45	nt o Film
2 FILER NAME ()SCAR	LEESER		1	3 ACCOUNT# (E	thics Commission Filers)
4 Date 5 F	Full name of contributorout-o	f-state PAC (ID#:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
PA	ATRICIA PERRY Contributor address; City; Stat 11 CAMINO BARI	· · <u>-</u> . · <u>.</u> · . · · ·		<i>(</i>) -	description (ii applicable)
4/1/2013 14	Contributor address; City; Stat LLCAM/NO BARI	e; Zip Code RANCA		\$500.0	 -
E	LPASO, TX 79	7912		(If travel outside	 of Texas, complete Schedule T)
	/ Job title (See Instructions)		Employer (See I	nstructions)	
I -		of-state PAC (ID#:)	Amount of	In-kind contribution
₁ P.F.	TRICIA PERRY Contributor address; City; Stat H CAMINO BARI			contribution (\$)	description (if applicable)
4/1/2013	Contributor address; City; Stat	e; Zip Code		\$500.°°	[
	H CHMINO DAKI	CHNCI		4 200.	l
L	L PASO, TX 79	112	,	(If travel outside o	of Texas, complete Schedule T)
Principal occupation	/ Job title (See Instructions)		Employer (See I	nstructions)	
Date	Full name of contributor	of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	CK IEPLITZ			001111111111111111111111111111111111111	i decomposit (ii deprination)
14/1/2013 5	CK TEPLITZ Contributor address; City; Stat 9116 VIA CUESTA	e; Zip Code	•	d 100000	
1110010	TIG VIH CUESIA			\$ 100.	
	LPASO, TX 70	1412		(If travel outside	I of Texas, complete Schedule T)
Principal occupation	/ Job title (See Instructions)		Employer (See I	nstructions)	
Date F	Full name of contributor	of-state PAC (ID#:		Amount of	In-kind contribution
1 . , IRO	BERT FOSTER			contribution (\$)	description (if applicable)
11/1/2012	Contributor address; City; Stat	e; Zip Code		# = 000	
4 4 3019 6	OBERT TOSTER Contributor address; City; Stat 080 SURET STE LPASO, TX 79	300		\$5,000	
	LPASO, IX "	1905			of Texas, complete Schedule T)
Principal occupation	/ Job title (See Instructions)		Employer (See I	nstructions)	
	^ -	of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	HILIP GABBARD Contributor address; City; Stat 27 CESPADA			Continuation (4)	1
4/8/2013/0	Contributor address; City; Stat	e; Zip Code		\$750°	
1,10,000	$X \cup C \subset C \cap C \cap$	110		200.	!
<u> </u>	L PASO, TX 799	12			I of Texas, complete Schedule T)
Principal occupation	/ Job title (See Instructions)		Employer (See I	nstructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. SCHEDULE A

	2013 MAY - 2 PM 5: 51			
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:
2 FILER NAME	IR LEESER		3 ACCOUNT # (Et	thics Commission Filers)
4 Date	5 Full name of contributor □ out-of-state PAC (ID#: JOANNE AUSTIN		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4/8/2013	6 Contributor address; City; State; Zip Code 590 EL GUSTO DR		\$ 100.00	
	ELPASO, TX 79912		L	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Ínstructions)	10 Employer (See	Instructions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
4 9 2013	Contributor address; City; State; Zip Code 721 ESPADA A		\$50.°°	
	ELPASO, TX 79912		(If travel outside o	f Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor uut-of-state PAC (ID#:_ ED HORTON)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4/11/2013			\$250.00	
, ,	LAGUNA NIGUEL, CAC	12677	(If travel outside	of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1/11/11/12	Contributor address: City: State: Zip Code			·
4/12/2013	Contributor address; City; State; Zip Code 1121 THUNDERBIRD DR	•	#1,001.00	
	EL PASO, TX 79912		(If travel outside	l of Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_ GEORGE MCALMON III)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4/12/2013	GEORGE MCALMON III Contributor address; City; State; Zip Code 3507 FAWN CREEK PA	T H	\$100.00	[
,	AUSTIN, TX 78746		(If travel outside	of Texas, complete Schedule T)
Principal occup	oation / Job title (See Instructions)	Employer (See	Instructions)	

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Texas Ethics Commission

(512) 463-5800

CITY CLERK DEPT. **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANSUB MAY -2 PM 5:51

SCHEDULE A

	:	т	7-1-1 C	adulo A:
The !	Instruction Guide explains how to complete this	form.	1 Total pages Sche	euule A.
2 FILER NAME OS CI	AR LEESER		3 ACCOUNT # (Et	thics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4/15/2013	TOM HETRICK 6 Contributor address; City; State; Zip Code 1415 CAMBRIDGE XING- SOUTHLAKE, TX 7609	12	\$200.00	 - of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See I		,
Date	Full name of contributor out-of-state PAC (ID#:_ ROBERT G. BECKOFF		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/17/2013	ROBERT G. BECKOFF Contributor address; City; State; Zip Code 1117 THUNDER BIRD DR.		\$ 500.00	•
	EL PASO, TX 79912			of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See I	instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_ ALLYSON LEWIS		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/18/2013	ALLYSON LEWIS Contributor address; City; State; Zip Code 7338 REMCON EL PASO, TX 79912		# 200 ,000	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See	·	
Date	Full name of contributor out-of-state PAC (ID#_PARUS DUDLEY		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/18/2013	PARUS DUDLEY Contributor address; City; State; Zip Code 9290 CINCHONA TRL GARDEN RIDGE, TX	182110	\$100.00	
	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
Date /	Full name of contributor out-of-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/18/2013	Contributor address; City; State; Zip Code 3125 COYOTE PASS DR EL PASO, TX 79938	•	#50°°	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See		o. rozda, comprete contentie 1)
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5:51

P.O. Box 12070

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A:
2 FILER NAME			3 ACCOUNT # (E	thics Commission Filers)
050	AR LEESER			
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
1 1	HILDA FINN 6 Contributor address; City; State; Zip Code 6560 GRAND Rdg. EL PASO, TX 79912	,		
ulialonia	6 Contributor address; City; State; Zip Code		41.555	
4/11/2015	6560 GRAND Rdg.		\$1,000	
	EL PASO, TX 79912		(If travel outside	of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	Instructions)	
			I .	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	SCOTT COHEN contributor address; City; State; Zip Code 5556 BACON RD. OAKLAND, CA 94619			
4/20/2012	Contributor address; City; State; Zip Code		\$10000	<u> </u>
1/20/00/	SOULAND AS OTHER		, "100.	1
				of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See	instructions)	
Date	Full name of contributor		Amount of	In-kind contribution
	FRIC, EVANS		contribution (\$)	description (if applicable)
11/20/2012	Contributor address; City; State; Zip Code			[
4/20/2013	'150 VIA MIRADA LN.		\$250.0	
1	ERIC EVANS Contributor address; City; State; Zip Code 750 VIA MIRADA LN. EL PASO, TX 79922			of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See		or restau, complete defledate ()
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	JAMES KOSCHMANN contributor address; city; State; Zip Code 6441 CALLE PLACIDO DR EL PASO, TX 79912		,,	
4/22/2013	Contributor address; City; State; Zip Code	•	\$500.°°	
100/00/0	CI DACA TY DODIA	•		1
	EL PASO, 11 19912			of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
1 1	SHELDON WHEELER Contributor address; City; State; Zip Code 6201 ESCONDIDO DR. EL PASO, TX 79912		contribution (\$)	description (if applicable)
4/22/2012	Contributor address; City; State; Zip Code		6 - 70	
رانع إحمال	6201 ESCONDIDO DR.		\$ 250 <i>.</i> "	
, ,	EL PASO, TX 79912		(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See		
-				

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(TDD 1-800-735-2989)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS 2013 MAY -2 PM 5:51

CITY CLERK DEPT.

(512) 463-5800

SCHEDULE A

The	Instruction Guide explains how to complete this	form.	1 Total pages Scho	edule A:
2 FILER NAME	AR LEESER		3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4/23/2013	WILLIAM HOLMES 6 Contributor address; City; State; Zip Code 1028 CALLE MILAGRO D EL PASO, TX 79912	K .	\$1,000	<u> </u>
1	EL PASO, TX 79912		(If travel outside	l of Texas, complete Schedule T)
	ation / Job title (See Instructions)	10 Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#_OSCAR DOM / NGUEZ		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/24/2013	Contributor address; City; State; Zip Code	A	\$250.°°	 -
	EL PASO, TX 79936		(If travel outside	l of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor ut-of-state PAC (ID#:_		Amount of contribution (\$)	In-kind contribution description (if applicable)
1.1	KOBERT SKOV		(3)	1
4/25/2013	ROBERT SKOV Contributor address; City; State; Zip Code BOX 310		\$250.	
,	CLINT, TX 79836		(If travel outside	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See	Instructions)	
Date (Full name of contributor out-of-state PAC(ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/25/2013	Contributor address; City; State; Zip Code 5835 ONIX SUITE 300		\$1,000.00	
	EL PASO, TX 79912	1		of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of contribution (\$)	In-kind contribution description (if applicable)
1/2/1/2012	DEFFREY BELLES Contributor address: City: State: Zip Code		ν (Ψ)	
7 00 000	11601 IKEY BURTON		4500.	
. , ,	EL PASO, TX 79936		(If travel outside	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See	Instructions)	•
<u> </u>				

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	1 S	ERK DEPT.	SCHEDULE A
		ZOI3 MAY	-2 PM 5:51	
The	Instruction Guide explains how to complete this	form.	1 Total pages Sch	edule A:
2 FILER NAME OSCAI	2 LEESER		3 ACCOUNT# (E	thics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC(ID#_)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4/26/2013	RICHARD LYON 6 Contributor address; City; State; Zip Code 7598 N. MESA SUITE A EL PASO, TX 79912		\$100.00	
				of Texas, complete Schedule T)
9 Principal occup	ation / Job title (See İnstructions)	10 Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#_ALTON R, PUGH)	Amount of contribution (\$)	In-kind contribution description (if applicable)
4/26/2013	4535 CROTON CIR.		\$75.00	
,	ELPASO, TX 79924		(If travel outside	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor)	Amount of	In-kind contribution
	_ · · ·		contribution (\$)	description (if applicable)
4/26/2013	JOHN GILL contributor address; City; State; Zip Code 10060 RAILROAD DR. EL PASO, TX 79924		\$ 250."	
	ation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
Principal occup	ation / 30b title (See instructions)	Employer (occ		
Date	Full name of contributor out-of-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
4/27/2013	Contributor address; City; State; Zip Code 5721 N. STANTON		\$100 :	
' '	ELPASO, TX 79912		(If travel outside	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of	In-kind contribution
, ,	ROBERT CADY		contribution (\$)	description (if applicable)
11/20/2012	Contributor address; City; State; Zip Code			
14/21/2017	194 CHERRY HILL LN.		1 to 200.00	
'	ROBERT CADY Contributor address; City; State; Zip Code 194 CHERRY HILL LN. SANTA TERESA, NM		(If travel outside	of Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.				

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

SCHEDULE A

		- YAM EIUZ	2 PM 5: 51	·
The	Instruction Guide explains how to complete this	form.	1 Total pages Sche	edule A:
2 FILER NAME			3 ACCOUNT # (Et	hics Commission Filers)
_	AR LEESER		,	
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
, /	SCOTT BAIN			
4/25/2012	6 Contributor address; City; State; Zip Code		\$250:	
1/00/2015	14160 BLAIR COURT	_		
•	SCOTT BAIN 6 Contributor address; City; State; Zip Code 14160 BLAIR COURT HORIZON CITY, TX 79926	8	(If travel outside o	of Texas, complete Schedule T)
9 Principal occuj	pation / Job title (See Instructions)	10 Employer (See I	nstructions)	
Date	OA Full name of contributor	0.50	Amount of	In-kind contribution
1 1	ANNE-SERE HERNANDEZ 9 ANDRE DR. HERNANDEZ 9 DR. M. AS Contributor address; City, State; Zip Code	A SPIER SI	contribution (\$)	description (if applicable) IN -KIND (FOOD FOR FUNDRAISER)
בותלדולע	Contributor address; City; State; Zip Code) A1-	#1998,85	(FOOD FOR ~
-11:1100	1023 QUINTA ANTIGUAT	JV 1	1, 1, 1, 10, 00	FUNDRAISER)
	ELPASO, TX 19912			of Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	Employer (See I	instructions)	
Date	Full name of contributor)	Amount of	In-kind contribution description (if applicable)
1 1	LOSCAR LEESER		contribution (\$)	I EN - KIND
11/2/1013	OSCAR LEESER Contributor address; City; State; Zip Code 1017 QUINTA ANTIGUA		\$0000	I IN-KIND
712/10/17	1017 QUINTA ANTIGUA		<i>™800.</i>	(KENI)
1 /	FL PASO, TX 79912		(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See	· · · · · · · · · · · · · · · · · · ·	,
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
			(4)	,
	Contributor address; City; State; Zip Code			<u> </u>
				1
			(If travel outside	of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See		
Data	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
Date	Full name of contributor out-of-state PAC (ID#:		contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code			
	Contributor address; City; State; Zip Code			
Diagram	police / Joh title (Soo Joseph - 1)	Employer (See		of Texas, complete Schedule T)
Principal occul	pation / Job title (See Instructions)	Employer (See	maductions)	
		<u> </u>		

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LOANS

CITY CLERK DEPT.

2013 MAY -2 PM 5:51

SCHEDULE E

	200 HM 1 - 5 LM 2: 21			
The	Instruction Guide explains how to compl	lete this form.	1 Total pa	ages Schedule E:
2 FILER NAME OSCAR	2 LEESER		3 ACCOL	JNT # (Ethics Commission Filers)
4 TOTA	AL OF UNITEMIZED LOANS:	⇒	⇔	\$5,120.80
5 Date of loan 4-28-2013	7 Name of lender OSCAR LEESER	out-of-state PAC (ID#)	9 Loan Amount (\$) #5,120,80
6 Is lender a financial Institution?	8 Lender address; City; State; 7101 N. MESA ST.	zip Code ギ、374		10 Interest rate
Y N	EL PASO, TX 70	7912		11 Maturity date
BUSINE	ion / Job title (See Instructions) ESS OWNER	EL PASO H		I
14 Description of Col	lateral .	15 Check if personal funds wer	e deposited	d into political account
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
18 Guarantor address; City; State; Zip Code				
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)		
Date of loan	Name of lender] out-of-state PAC (ID#		Loan Amount (\$)
Is lender a financial Institution?	Lender address; City; State; 2			Interest rate
YN				Maturity date
Principal occupati	ion / Job title (See Instructions)	Employer (See Instructions)		
Description of Colla	ateral	Check if personal funds were	deposited	into political account
none				
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
not applicable	Guarantor address; City; S	State; Zip Code		
Principal Occupat	ion (See Instructions)	Employer (See Instructions)	1	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.				

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POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2013 MAY -2 PM 5: 51

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Texas Ethics Commission

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By
Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

	ine instruction Guide explains now to t	complete this form.	
1 Total pages Schedule F:	2 FILER NAME OSCAR LEFSER		3 ACCOUNT # (Ethics Commission Filers)
4 Date H-11-2013	RESULTS VIDEO, IN	IC.	
6 Amount (\$) \$ 975.00	7 Payee address; City; State; Zip Code 4585 RIPLEY DR. BLDG; J		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description (If tra	vel outside of Texas, complete Schedule T) DUCTON
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Date 4-12-2013	EL PASO INC.		
4707.00	Payee address; City; State; Zip Code	EL PASO	TX 79902
PURPOSE OF	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If tra	vel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Date 4-12-2013	Payee name WHAT'5 UP		
4743.00	Payee address; City; State; Zip Code	EL PASO,	TX 79902
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (Iftra	evel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Date 4-12-2013	CENTRAL BUSINESS ASS	SOCIATION	
Amount (\$)	Payee address; City: State: Zip Code 310 N. MESA SUITE 420 EL PASO, TX 7990		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) EVENT EXPENSE	Description (If tra	PORUM
Complete ONLY if direct expenditure to benefit C/	Candidate / Officeholder name OH	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED

POLITICAL EXPENDITURES

Texas Ethics Commission

CITY CLERK DEPT.

SCHEDULE F

2013 MAY -2 PH 5: 52

EXPENDITURE CATEGORIES FOR BOX 8(a) Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Gift/Awards/Memorials Expense Advertising Expense Transportation Equipment & Related Expense Solicitation/Fundraising Expense Accounting/Banking Legal Services Travel In District Contributions/Donations Made By Food/Beverage Expense Consulting Expense Candidate/Officeholder/Political Committee Event Expense Polling Expense Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not listed above) Printing Expense Fees The Instruction Guide explains how to complete this form. 3 ACCOUNT # (Ethics Commission Filers) 1 Total pages Schedule F: 4 Date (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OF **EXPENDITURE** Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name RAMIREZ DIANA City; State; Zip Code Description (If travel outside of Texas, complete Schedule T) PURPOSE OF EXPENDITURE Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Description (If travel outside of Texas, complete Schedule T) OF **EXPENDITURE** Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH City; State; Description (If travel outside of Texas, complete Schedule T) PURPOSE OF **EXPENDITURE** Candidate / Officeholder name Office sought Office held Complete ONLY if direct

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expenditure to benefit C/OH

CITY CLERK DEPT. POLITICAL EXPENDITURES

SCHEDULE ${f F}$

2013 MAY -2 PM 5: 52									
EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Event Expense	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District		Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee					
Fees	Printing Expense	Office Overhead/R	tental Expense	OTHER (enter a category not listed above)					
The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F:	<u> </u>	SER		3 ACCOUNT	# (Ethics Commission Filers)				
4 Date 4-26-2013	5 Payee name KDBC								
# 7, 110.00	801 N. OREGON EL PASO, TX	79902	г		·				
8 PURPOSE	(a) Category (See categories listed at the to	op of this schedule)	' '	(If travel outside of Texas	s, complete Schedule 1)				
OF EXPENDITURE	LADVERTISING E	KPENSE	MEDI	A BUYS					
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	e	Office soug	ht	Office held				
Date 4-20-3013	Payee name KFOX								
Amount (\$)	Payee address; City; S	State; Zip Code							
⁴ 7,900.°°	EL PASO, TX	79912							
PURPOSE	Category (See categories listed at the t		Description	(If travel outside of Texa	s, complete Schedule T)				
OF EXPENDITURE	ADVERTISING E	XPENSE	MEDIF	7 Buys					
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder nam DH	е	Office soug	ht	Office held				
Date 4-26-2013	Payee name KTSM								
# 6,250	Payee address; City: S SOI N. OREGON EL PASO, TX	State; Zip Code JST, 7990 C	<u>ل</u>						
PURPOSE OF EXPENDITURE	Category (See categories listed at the t	top of this schedule)	Description MEDI	(If travel outside of Texa A BUYS	s, complete Schedule T)				
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder nam	ie	Office soug	ht	Office held				
Date 4-26-2013	Payee name								
Amount (\$) \$ 18,470.00	Payee address; city; s 4140 R10 BRAV EL PASO, TX	State: Zip Code 10 ST 79902	,	·					
PURPOSE	Category (See categories listed at the t	top of this schedule)	Description	(If travel outside of Texa	is, complete Schedule T)				
OF EXPENDITURE	ADVERTISING	EXPENSE	MEI	DIA BUY	2				

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Office held

Office sought

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2013 MAY -2 PM 5: 52

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense

Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F:	2 FILER NAME OSCAP LEESER		3 ACCOUNT # (Ethics Commission Filers)					
4 Date 4-24-2013	5 Payee name LEVY AD GROUP	اسمهور بسرون						
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$10,674.50	5905 S. DE CATUR BLVD,#1 LAS VEGAS, NV 89118							
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule)	(b) Description (If tra	evel outside of Texas, complete Schedule T)					
EXPENDITURE	ADVERTISING EXPENSE							
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held					
Date 4-29-2013	Payee name NORTH AMERICAN COMM	UNICAT70A	VS					
Amount (\$)	Payee address; City; State; Zip Code							
# 14,421,59		6635						
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If tra	avel outside of Texas, complete Schedule T)					
EXPENDITURE	PRINTING EXPENSE							
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH	Office sought	Office held					
Date 4-30-2013	JUAN STOCKMEYER							
#84,79	Payee address; City; State; Zip Code 515 HAGUE EL PASO, TX 19902							
PURPOSE OF EXPENDITURE	Category (See categorie's listed at the top of this schedule) POLLING EXPENSE	Description (If tra	avel outside of Texas, complete Schedule T)					
Complete QNLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held					
Date 4-30-2013	SELECT PRINTING							
Amount (\$) \$2,306.98	Payee address; City; State; Zip Code 6800 GATEWAY EAST, SEL PASO, TX 79915							
PURPOSE OF	Category (See categories listed at the top of this schedule)	۔ میماث ا	avel outside of Texas, complete Schedule T)					
EXPENDITURE	PRINTING EXPENSE	HANDO						
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH								
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POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2013 MAY -2 PM 5: 52

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense	Gift/Awards/Memorials Expense								
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense Transportation Equipment & Related Ex							
Consulting Expense	Food/Beverage Expense	Travel In District Contributions/Donations Made By Travel Out Of District Candidate/Officeholder/Political Comm							
Event Expense Fees	Polling Expense Printing Expense	Office Overhead/Re		THER (enter a categor					
,	The Instruction Guide	e explains how to c							
1 Total pages Schedule F:	2 FILER NAME	^			nics Commission Filers)				
	OSCAR LEES	ER							
4 Date	5 Payee name								
4-30-2013	JAMES HARMON								
6 Amount (\$)	7 Payee address; City; State; Zip Code								
\$11.000	14 DHWINILL KU' 100								
411679.	BRANFORD, CT 06405								
8 PURPOSE	(a) Category (See categories listed at the to	pp of this schedule)	(b) Description (If	travel outside of Texas, con	plete Schedule T)				
OF EXPENDITURE	OTHER		PHONE	SURVE	1				
9 Complete ONLY if direct	Candidate / Officeholder name		Office sought		Office held				
expenditure to benefit C/C	H 								
Date	Payee name	^							
4-30-2013	CHRIS ALOSTA	4			·				
Amount (\$)	Payee address; City: S	tate; Zip Code							
# M M I I	14321 ELGIN				'				
# 120.U9	FI PASO TX	79907	•						
PURPOSE	Category (See categories listed at the to	op of this schedule)	Description (If	f travel outside of Texas, con	nplete Schedule T)				
OF	MAN DENCON	CE EVOCA	KE						
EXPENDITURE	HOOD/ BEVENHO	JE EXTLI	12 C		Off. It ald				
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name H	9	Office sought		Office held				
experience to porione of a									
Date	Payee name	HUG							
4-30-2013		ITING-							
Amount (\$)	Payee address; City; St	tate; Zip Code	TE,3-F						
# Q 1 191	1 6800 BULL MULL	CHOI, O		}					
4 Olt 1	EL PASO, TX	19915							
PURPOSE	Category (See categories listed at the to	op of this schedule)		f travel outside of Texas, cor	nplete Schedule T)				
OF EXPENDITURE	PRINTING EXPEN	NCE	INVITA	TIONS					
	Candidate / Officeholder name		Office sought		Office held				
Complete ONLY if direct Candidate / Office noider name Office sought Complete Sought Complete									
Date	Payee name		10						
4-30-2013	I SMA COMMUI	NI CATION	5						
Amount (\$)	Pavee address: City: S	tate: Zip Code							

PURPOSE OF EXPENDITURE

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Office sought

Description (If travel outside of Texas, complete Schedule T)

Office held

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